## THE ARMY SCHOOL SYSTEM (TASS) UNIT PRE-EXECUTION CHECKLIST

(FOR USE OF THIS FORM SEE TRADOC REG 350-18; PROPONENT IS DCSOPS&T, TASSD)

| Please print or type.   |  |  |   |  |  |  |  |  |  |  |  |  |  |
|---|--|--|---|--|--|--|--|--|--|--|--|--|--|
| 1. NAI  | ME:                                    |  | 2. SSN:   |  |  |  |  |  |  |  |  |  |  |
| 3. UNI  | T:                                     |  | 4. DOR:   |  |  |  |  |  |  |  |  |  |  |
| 5. CO   | URSE                                   | TITLE:   | 6. REPORT DATE:   |  |  |  |  |  |  |  |  |  |  |
| First<br>leader's   |  | Soldier's initials   | PART I - UNIT PRE-EXECUTION (D-90 to D-1)   |  |  |  |  |  |  |  |  |  |  |
|   |  |  | Coordination between customer unit and TASS unit to identify the Soldier by name?   |  |  |  |  |  |  |  |  |  |  |
|   |  |  | Soldier in receipt of school/course information?  |  |  |  |  |  |  |  |  |  |  |
|   |  |  | Read ahead packets/prerequisite testing complete? (If applicable.)  |  |  |  |  |  |  |  |  |  |  |
|   |  |  | All required clothing/equipment IAW school/course information packet.   |  |  |  |  |  |  |  |  |  |  |
| Soldier demonstrated physical fitness requirement on diagnostic test adn within 30 days of scheduled departure for school. (As required.) |  |  |   |  |  |  |  |  |  |  |  |  |  |
| Soldier meets standards of AR 600-9?  |  |  |   |  |  |  |  |  |  |  |  |  |  |
|   | Transportation requirements completed? |  |   |  |  |  |  |  |  |  |  |  |  |
| Adequate cash/traveler checks/Government Credit Card?   |  |  |   |  |  |  |  |  |  |  |  |  |  |
|   |  |  | Individual orders received?   |  |  |  |  |  |  |  |  |  |  |
|   |  | Individual has current periodic physical (within 5 years). |   |  |  |  |  |  |  |  |  |  |  |
| Individual meets remaining TIS requirements.  |  |  |   |  |  |  |  |  |  |  |  |  |  |
| School mailing address/telephone numbers received? (For family.)  |  |  |   |  |  |  |  |  |  |  |  |  |  |
| Ten (10) copies of orders.  |  |  |   |  |  |  |  |  |  |  |  |  |  |
| 1,000   |  |  | Transportation verified/approved (ticket picked up).  |  |  |  |  |  |  |  |  |  |  |
|   |  |  | Current/valid identification card.  |  |  |  |  |  |  |  |  |  |  |
|   |  |  | ID tags (1 pair).   |  |  |  |  |  |  |  |  |  |  |
|   |  |  | If applicable: Soldier requiring corrective lenses has a set of military prescription eyeglasses and protective mask inserts. |  |  |  |  |  |  |  |  |  |  |
|   |  |  | Notify soldier of requirement to take APFT and be weighed, as required.   |  |  |  |  |  |  |  |  |  |  |
| Unit P  | OC Lis                                 | t:   |   |  |  |  |  |  |  |  |  |  |  |
| CDR:  | B: (                                   | )  | Н: ( )  |  |  |  |  |  |  |  |  |  |  |
| 1SG:  | B: (                                   | )  | H: ( )  |  |  |  |  |  |  |  |  |  |  |
| FTM:  | B: (                                   | )  | H: ( )  |  |  |  |  |  |  |  |  |  |  |
| Unit POC FAX: ( )   |  |  |   |  |  |  |  |  |  |  |  |  |  |
| Unit PO   | Unit POC E-mail:                       |  |   |  |  |  |  |  |  |  |  |  |  |

|  | PART  | II - R     | OUT             | INE P          | RERE                | TISIU    | ES           |         |         |     |      |    |
|--|---|------------|-----------------|----------------|---------------------|----------|--------------|---------|---------|-----|------|----|
| TASK   | REGULATION DATA                                 |            |                 |                |                     |          | SOLDIER DATA |         |         |     |      |    |
| Minimum Aptitude Score (ASVAB)   | со  | CL         |                 | FA             | GM<br>ST            | MM       | CO<br>OF     | CL      | F       | Α   | GM   | ММ |
| (if applicable)  | OF  | EL         |                 | SC             |                     |          |              | EL      | S       | 0   | ST   | GT |
| Color vision requirements (if applicable)  |   |            |                 |                |                     |          |              |         |         |     |      |    |
| Physical demand rating/profile (PULHES)  | Р   | U          | L               | Н              | E                   | S        | Р            | U       | L       | Н   | E    | S  |
| *See Part III for P/T profiles   |   |            |                 |                |                     |          |              |         |         |     |      |    |
| Prerequisite phase/course attendated Date of completion:  Military and civililan vehicle operated Military license number:   | Cours   | e com      | pletio<br>appli | on:<br>cable): |                     |          | hase co      | mpletio | on:     |     | - 12 |    |
| Civilian license number:   |   |            |                 |                | on date<br>ion date |          |              |         | State   | · · |      |    |
| Security clearance (if applicable *Permanent profile attendees (if completed DA Form 3349 (mus TPU/Traditional Guardsmen mud doctor-approved alternate aerol All required waivers (if applicable | f applica<br>t include<br>ist have<br>bic event | ble): Army | AC & doct       | AGR<br>tor-app | proved              | alterna  | te aero      | bic ev  | ent for | APF |      | h  |
| Other requirements (if applicable  | e)  |            |                 |                |                     |          | 857.9        |         |         |     |      |    |
| OTHER REQUIREMENTS OF I  | DA PAM  | 611-2      | 1 N             | OT PR          | EVIOL               | JSLY L   | ISTED:       |         |         | ä   |      |    |
| Other requirements (if applicable) Other requirements (if applicable)  |   |            |                 |                |                     | . ,      |              |         |         |     |      |    |
| Other requirements (if applicable  |   |            |                 |                |                     |          | -24555       |         |         |     |      |    |
| Other requirements (if applicable I have been counseled and have a Attendance at this course and classed detract from or prevent my succession.  | read all re                                     | t pose     | any             | known          | hardsh              | nip on m |              |         |         |     |      |    |
| Student's Signature:   |   |            |                 |                |                     |          |              | D       | ate:    |     |      |    |
| I have reviewed the above sol<br>have counseled him/her on th  |   |            |                 |                |                     |          |              |         |         |     |      |    |
| Commanding Officer<br>(typed name):  | S.F   |            |                 |                |                     |          |              | D       | ate:    |     |      |    |
| Signature:   | 05557   |            |                 |                |                     |          |              |         |         |     |      |    |